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First Annual

Progress Report

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ALCOHOLISM FOUNDATION OF ALBERTA

PHILOSOPHY OF THE FOUNDATION

The approach of the Foundation to the problem of alcoholism in Alberta is based on the following concepts:

1. The Foundation recognizes alcoholism as a treatable illness and a public health problem of first magnitude and, therefore, as a public responsibility.
2. The Foundation regards the alcoholic as a sick person who can be helped and who is well worth helping.
3. The Foundation is concerned only with the illness, alcoholism, not with social drinking or with the problems of alcohol per se.
4. The Foundation's approach is scientific and non-controversial. It takes neither the side of the "wets" nor the "drys". It is not allied to any Temperance Movement.
5. As an important step toward prevention of alcoholism through changing public attitudes, The Foundation recognizes its responsibility and the illness, alcoholism.

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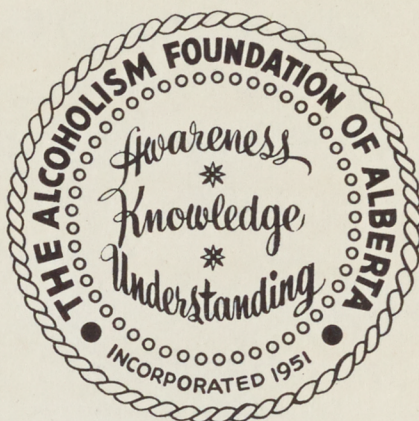


FIRST
ANNUAL PROGRESS REPORT

Period

July 1953 - Dec. 1954

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THE ALCOHOLISM FOUNDATION
OF
ALBERTA

9910 - 103rd Street,
Edmonton, Alberta.

737 - 13th Avenue, W.,
Calgary, Alberta.

This First Annual Progress Report has been
co-operatively compiled by the following staff members:
Dr. D. Bell, Miss G. Brunton, Mr. A. Fraser, Mrs. M.
Heath, Mrs. M. Ivan, Miss D. Stith, and Mr. J. George
Strachan.

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TABLE OF CONTENTS

	Page
Letter of Transmittal, J. George Strachan - - - - -	4
Acknowledgements, Dr. J. Donovan Ross - - - - -	5
Nature of the Illness - - - - -	7
A Community Problem - - - - -	9
History of the Foundation - - - - -	10
Articles of Incorporation - - - - -	15
Organization and Administration - - - - -	16
Chart No. 1 - Organization and Functions - - - - -	17
Chart No. 2 - Staff Organization - - - - -	18
Chart No. 3 - Education - - - - -	19
Chart No. 4 - Treatment & Rehab. Programming - - -	20-21
Chart No. 5 - Personal History Data - - - - -	22
Prospectus- - - - -	23
Educational Program - - - - -	24
Treatment & Rehabilitation	
Basic Concepts - - - - -	27
Approach & Procedure - - - - -	29
Treatment Techniques - Fees - - - - -	30
Alcoholics Anonymous - - - - -	31
Rehabilitation of the Incarcerated Alcoholic - - -	32
Rehabilitation of the "Homeless Man" - - - - -	33
Alcoholism Research - - - - -	34
Prevention - - - - -	35
Executive Director's Report - - - - -	36
Chart No. 6 - Board & Committees - - - - -	38
Educational & Information Services - - - - -	39
Financial Statement - - - - -	40

To: Dr. J. Donovan Ross, President,
and Members of the Board of Directors,
The Alcoholism Foundation of Alberta.

I have the honor to present the First Annual Progress
Report of the administration of The Alcoholism Foundation of
Alberta.

A considerable portion of this report is a detailed account
of the genesis, history, program prospectus, organization, ad-
ministration, and functions of The Foundation. This review is
necessary both for The Foundation's own guidance and also for
the benefit of those interested in the work of The Foundation.

Appendices, including a financial statement for the fiscal
year 1954-55, a certificate of audit, the estimated budget for
the fiscal year 1955-56, and a review and statistical report of
services rendered are being distributed to all individuals
concerned with the functioning of The Foundation.

This report is respectfully submitted.

J. George Strachan,
Executive Director,
The Alcoholism Foundation of Alberta.

March 31st, 1955.

ACKNOWLEDGEMENTS

In this our First Annual Progress Report it is fitting that I express my gratitude to all who have done so much to make The Alcoholism Foundation of Alberta a reality. Because of their vision and untiring efforts, The Foundation is making a significant contribution toward the solution of a major public health problem.

To the members of my family who have patiently and earnestly assisted me in this work, I express my sincere thanks.

To the members of my profession, particularly Dr. W. Bramley-Moore, Dr. E. Donald, and Dr. Morley Young, who gave generously of their time and experience as members of the Committee on Alcoholism, I am greatly indebted.

To Mr. George B. Henwood, I extend a special word of thanks. His legal training, his experience in the John Howard Society, and his keen insight into the many aspects of the problems of alcoholism enabled him to make a signal contribution to the plans for The Foundation.

To the following men and women who formed the first Board of Directors must go much of the credit for establishing a sound, over-all program for Alberta:

Mr. George Cristall	Dr. R.M. Parsons
Mr. J.B. Cross	Mr. N.F. Priestley
Mr. R.J. Dinning	Mr. Cliff Ross
Mrs. R.B. Gunn	Dr. Andrew Stewart
Mr. Roy Marler	Mrs. C.R. Wood

At their own expense, these community leaders from business and professional fields, of diverse opinions and backgrounds, gave generously of their time and ability to develop a program for Alberta. With the arrival of our Executive Director, Mr. J. George Strachan, in July, 1953 their plans began to be realized.

Finally, on behalf of the Board of Directors and myself, I wish to express my sincere gratitude to Premier E. C. Manning, to Dr. W. W. Cross and other members of the Executive Council, and to members of the Legislative Assembly who were instrumental in making available the necessary governmental funds for the establishment of The Foundation.

The vision of many people - those I have named and many others - has gone into the development of the Alberta Program. Through the continuing support and encouragement of the people of Alberta, we shall build an ever more comprehensive and effective program toward the prevention of alcoholism, one of our major public health problems.

J. Donovan Ross, M.D., M.L.A.,
President,
The Alcoholism Foundation of Alberta.

ALCOHOLISM

Nature of the Illness

Alcoholism is an illness characterized by compulsive drinking. Excessive habitual or periodic use of alcoholic beverages; inability to refuse drinks at will under certain conditions; inability to control the amount of alcohol consumed; and progressive disorganization of personality are symptoms of the illness.

Alcoholism is a serious, progressive illness, which, if not arrested, will result in a physical, emotional, and social breakdown sometimes ending in insanity or death. It strikes individuals at every level of our society.

Once established it is a chronic condition; that is, although the disease may be arrested, it cannot be cured in the sense that the alcoholic can become a controlled drinker.

The Alcoholism Subcommittee of the World Health Organization has defined alcoholism as:

"A chronic disease, or a disorder of behavior, characterized by the repeated drinking of alcoholic beverages to an extent that exceeds customary dietary use or the ordinary compliance with the social drinking customs of the community, and that interferes with the drinker's health, inter-personal relationships, or economic functioning."

Identification of the Alcoholic

The Alcoholism Subcommittee of the World Health Organization has identified alcoholics as:

"...those excessive drinkers whose dependence upon alcohol has attained such a degree that it shows a noticeable mental disturbance or an interference with their bodily and mental health, their inter-personal relations, and their smooth social and economic functioning..."

The following classification appears in the Second Report of the Alcoholism Subcommittee:

- | | | |
|-----|--|--------------|
| (1) | Irregular symptomatic excessive drinkers | |
| (2) | Habitual symptomatic excessive drinkers | } Alcoholics |
| (3) | Addictive drinkers (alcohol addicts) | |

The Subcommittee makes two comments regarding this classification:

- (a) "The two latter groups...comprise the alcoholics proper."
- (b) "Complications of a physical nature may occur in all the three classes, while mental complications (acute, chronic, mild, or severe) may occur in classes (2) and (3) only."

The Foundation is convinced that the pattern of drinking, the effect on behavior, and the progression of signs and symptoms vary immensely from individual to individual. Considerable effort and education may be required to give an individual insight into the fact that he has a problem with alcohol and that he requires treatment.

From the standpoint of the need for help and treatment, The Foundation is concerned equally with the early problem drinker and with the alcoholic.

ALCOHOLISM: A COMMUNITY PROBLEM

Total community action has become imperative if the problem of alcoholism is to be solved. Today, it is recognized that alcoholism ranks with cancer, heart ailments, and polio as a threat to the nation's health. People who have become addictive, compulsive, uncontrolled drinkers affect, both directly and indirectly, ten times their numbers. Millions of dollars are lost annually through absenteeism, accidents, lowered efficiency, waste, and retarded production. Thousands of homes and families are disrupted. Almost everyone within the sphere of the alcoholic's influence is at some time hurt by the effects of this progressive illness.

Thus, alcoholism presents a problem to every community, large or small. Refusal or failure to recognize the problem does not rule out its existence.

THE PROBLEM IN ALBERTA

The effects of alcoholism -- physical, psychological, social, economic -- are sufficiently apparent in Alberta to indicate that this illness has become a public responsibility.

Alcoholism is everybody's business! Industry is beginning to recognize alcoholism as a threat to the nation's production; the medical profession recognizes alcoholism as a threat to the nation's health; social agencies recognize alcoholism as a threat to community welfare; legislative and law enforcement personnel regard alcoholism as a problem involving countless individuals and tremendous costs.

More than half of the people in local jails are sentenced for violations in which excessive drinking is a factor. It is being recognized that treatment rather than repetitive incarceration is the answer. It is noteworthy that the Province of Alberta is playing a leading role in the development of rehabilitative facilities.

The province will gain economically and socially by working to prevent alcoholism by aiding the excessive drinker before he has reached the advanced stages of the illness.

Aware of the seriousness of the problem, the original sponsors of the Alberta Program gave generously of their time and ability to win the support of community leaders toward the establishment of a Foundation in the province. The following brief history of The Foundation is an attempt to highlight their efforts rather than to pay fitting tribute to them.

HISTORY OF THE FOUNDATION

September, 1950

At the annual meeting of the College of Physicians and Surgeons of Alberta, a resolution was passed to set up a Committee on Alcoholism. This Committee, under the chairmanship of Dr. J. Donovan Ross, consisted of the following members: Dr. W. Bramley-Moore, Dr. E. Donald, and Dr. Morley Young.

January, 1951

Dr. Ross made a survey of alcoholism programs in Eastern Canada and the United States.

February, 1951

The Committee on Alcoholism passed a resolution that a private foundation be established in Alberta.

Summer, 1951

The sponsors of The Foundation held a series of informal meetings in the course of which it was decided that Mr. H.D. Archibald, Executive Director of the Alcoholism Research Foundation of Ontario should be invited to discuss plans for The Foundation.

A Board of Directors was appointed to draw up the articles of incorporation and to undertake the initial preparations required to set The Foundation in operation. Members of the first Board were:

Mr. George Cristall	-	Calgary	Dr. R.M. Parsons	-	Red Deer
Mr. J. B. Cross	-	Calgary	Mr. N.F. Priestley	-	Calgary
Mr. R.J. Dinning	-	Calgary	Mr. C. W. Ross	-	Edmonton
Mrs. R.B. Gunn	-	Lloydminster	Dr. J. Donovan Ross	-	Edmonton
Mr. R. C. Marler	-	Edmonton	Dr. Andrew Stewart	-	Edmonton
			Mrs. C. R. Wood	-	Stony Plain

September, 1951

At the annual meeting of the College of Physicians and Surgeons, approval was given to plans for The Foundation as outlined by the original sponsors.

The first meeting of The Alcoholism Foundation of Alberta was held in the Macdonald Hotel, September 27th, 1951. Before the meeting, Mr. Archibald spoke to a gathering which included the Board of Directors, the Executive Council of the Alberta College of Physicians and Surgeons, and members of the Executive Council of the Alberta Government. Later that day, the following officers were elected:

Dr. J. Donovan Ross	-	President
Mr. R. J. Dinning	-	Vice-President
Mrs. C. R. Wood	-	Vice-President

An Executive Committee was nominated which consisted of the President, two Vice-Presidents, Dr. Andrew Stewart, and Mr. C.W. Ross.

It was decided that the Executive Committee should investigate ways and means of financing the organization and look for a capable person to fill the position of Executive Director of The Foundation.

The Executive Committee gave consideration to securing the services of a Secretary for The Foundation who would assume the following responsibilities: to keep the objectives of The Foundation before the public; to seek out people who might be interested in contributing to the financing of The Foundation; and to lay the groundwork for a survey of the problem of the recidivist alcoholic.

The society to be known as The Alcoholism Foundation of Alberta was formally organized and incorporated under The Societies Act, September 27th, 1951.

October, 1951

At a meeting of the Executive Committee the following decisions were made:

- a) Mr. George B. Henwood was appointed Secretary pro tem effective as of and from October 1st, 1951. His fulfillment of his responsibilities were an invaluable contribution to the organization of The Foundation.
- b) It was agreed that the Board meet with the Cabinet to discuss implementation of The Foundation's program.

December, 1951

On December 11th, members of the Board met Premier Manning, the Hon. Dr. W.W. Cross, the Hon. Lucien Maynard, and the Hon. Ivan

Casey. A draft budget was submitted and discussed. The Premier requested that the President submit a summary of the budget for consideration by the whole Cabinet. The Attorney General was interested in the possibility of the Foundation's program including a rehabilitation project. Possibilities of establishing a working relationship between The Foundation and Alcoholics Anonymous were discussed.

The two latter points were thoroughly investigated and have been incorporated into the Foundation's program.

September, 1951 to July, 1953

To arouse interest in and support for The Foundation, meetings were held with professional groups and service clubs throughout the province.

February, 1953

The President of The Foundation directed a letter to the Hon. E. C. Manning, Premier of Alberta, outlining a prospectus and a budget for the initial development of The Foundation.

April, 1953

Members of the Board of Directors met Mr. J. George Strachan, Director of the Milwaukee Information Centre on Alcoholism, who was fulfilling speaking engagements in Edmonton. Mr. Strachan's appointment to the position of Executive Director of The Foundation was later unanimously approved.

May, 1953

At Dr. Ross' request, Dr. John W. Scott, Dean of the Faculty of Medicine, University of Alberta, organized a Medical Advisory Committee. Members were:

Dr. Andrew Cairns
Dr. Bruce Collier
Dr. A. D. MacPherson
Dr. Harold Rice
Dr. R. F. Shaner
Dr. Douglas Smith

Under the Chairmanship of Dr. Scott, the Committee has assisted in setting up policies pertaining to the medical activities of The Foundation.

June, 1953

Mr. J. G. Strachan agreed to assume responsibility for the organization and direction of The Foundation.

The Provincial Government purchased the John McDougall residence in Edmonton which serves as the Administrative Centre for the province.

July, 1953

The Executive Committee held its first meeting in the new centre, July 3rd.

Mr. J. George Strachan arrived in Edmonton to assume the post of Executive Director of The Foundation.

The first three employees were hired.

On July 14th the Edmonton Centre of The Foundation was officially opened.

August, 1953

The program prospectus evolved by the Director and outlining the development and organization of The Foundation was completed August 1st and distributed.

The first formal meeting of the Medical Advisory Committee was held on August 13th.

Staff requirements were reviewed and recommendations made.

September, 1953

At the first formal Board meeting held in The Foundation offices, the Director's prospectus and budget were presented.

February, 1954

On February 11th the first meeting of the Medical Subcommittee on Treatment was held.

The first Annual Meeting of the total Foundation membership was held on February 24th.

May, 1954

The Belmont Rehabilitation Centre was opened and its activities were correlated with those of The Foundation.

August, 1954

The First Annual Alberta Conference on Alcohol Studies was held at the University of Alberta under the joint sponsorship of The Foundation and the Department of Extension.

The first informal meeting of program directors was held to discuss the establishment of a Canadian Committee on Alcoholism.

November, 1954

In response to a demand for treatment and information services, The Foundation opened in Calgary a treatment and referral centre, the first to be established outside Edmonton.

ARTICLES OF INCORPORATION

1. The name of the Society is The Alcoholism Foundation of Alberta.
2. The objects of the Society are:
 - (a) To conduct a programme of research in alcoholism, defined as any diseased condition produced by the action of alcohol on the human system.
 - (b) To make necessary surveys such as ascertaining the number of persons convicted and sentenced to payment of fines or to imprisonment to Gaol for offences under the Liquor Control Act, or the Criminal Code of Canada in which intoxication or drunkenness was charged and a background including previous convictions of such persons, and also a survey of selected areas in Alberta in order to determine the extent of the problem of alcoholism in the province.
 - (c) To establish and operate a hospital or hospitals for experimentation in methods of treating alcoholics and/or to make necessary arrangements with existing hospitals for this purpose and for the setting up of out-patient clinics.
 - (d) To take such steps as may be considered advisable to educate the public and particularly younger persons as to the consequences and means of prevention of alcoholism.
 - (e) To acquire lands by purchase, rental, or otherwise, and erect and otherwise provide a building or buildings for the use of the Society.
 - (f) To provide all necessary equipment and furniture, libraries, and reading rooms for carrying on its objects.
 - (g) To sell, manage, lease, mortgage, dispose of, or otherwise deal with the property of the Society.
3. The operations of the Society are to be carried on in the City of Edmonton and elsewhere in the Province of Alberta.

Signatories to the Articles of Incorporation

Mrs. C. R. Wood
Mr. C. W. Ross
Dr. Andrew Stewart
Mr. George B. Henwood
Mr. Norman F. Priestley
Mr. George Cristall
Mr. J. B. Cross

Dr. R. MacGregor Parsons
Mr. R. C. Marler
Mr. R. J. Dinning
Mr. H. E. Pearson
Mr. Gerry Gaetz
Mr. H. H. Ross
Mr. James R. McFall

ORGANIZATION AND ADMINISTRATION

The organization and administration of The Foundation are outlined on Chart # 1.

The Alcoholism Foundation of Alberta is a private Foundation incorporated under The Societies Act. It was originally sponsored by The College of Physicians and Surgeons of Alberta, through the appointment of a Committee on Alcoholism under the chairmanship of Dr. J. Donovan Ross. By means of legislative grant, the government aided in the initial development of The Foundation. It is now financed by government, business, industry, and private contributions to develop and maintain broad programs of education, treatment rehabilitation, and research. The goal of these programs is the prevention of alcoholism.

At present there are two Centres, one in Edmonton and one in Calgary. Others will be provided as they are needed and as funds, facilities, and personnel are available. The Edmonton Centre is the Administrative Office for Alberta.

By constitution, the program of The Foundation is under the direction of the Executive Director and is supervised by the Board of Directors and the Executive Committee of The Foundation.

Advisory Committees have been established to assist in the development of The Foundation's program. These Committees make recommendations and policy suggestions regarding education, medical treatment, legislation, and strive for the development of better rapport with and attitudes among professional and industrial groups.

Subcommittees for the study of special phases of The Foundation's program are as follows: treatment, finance, industry, and research.

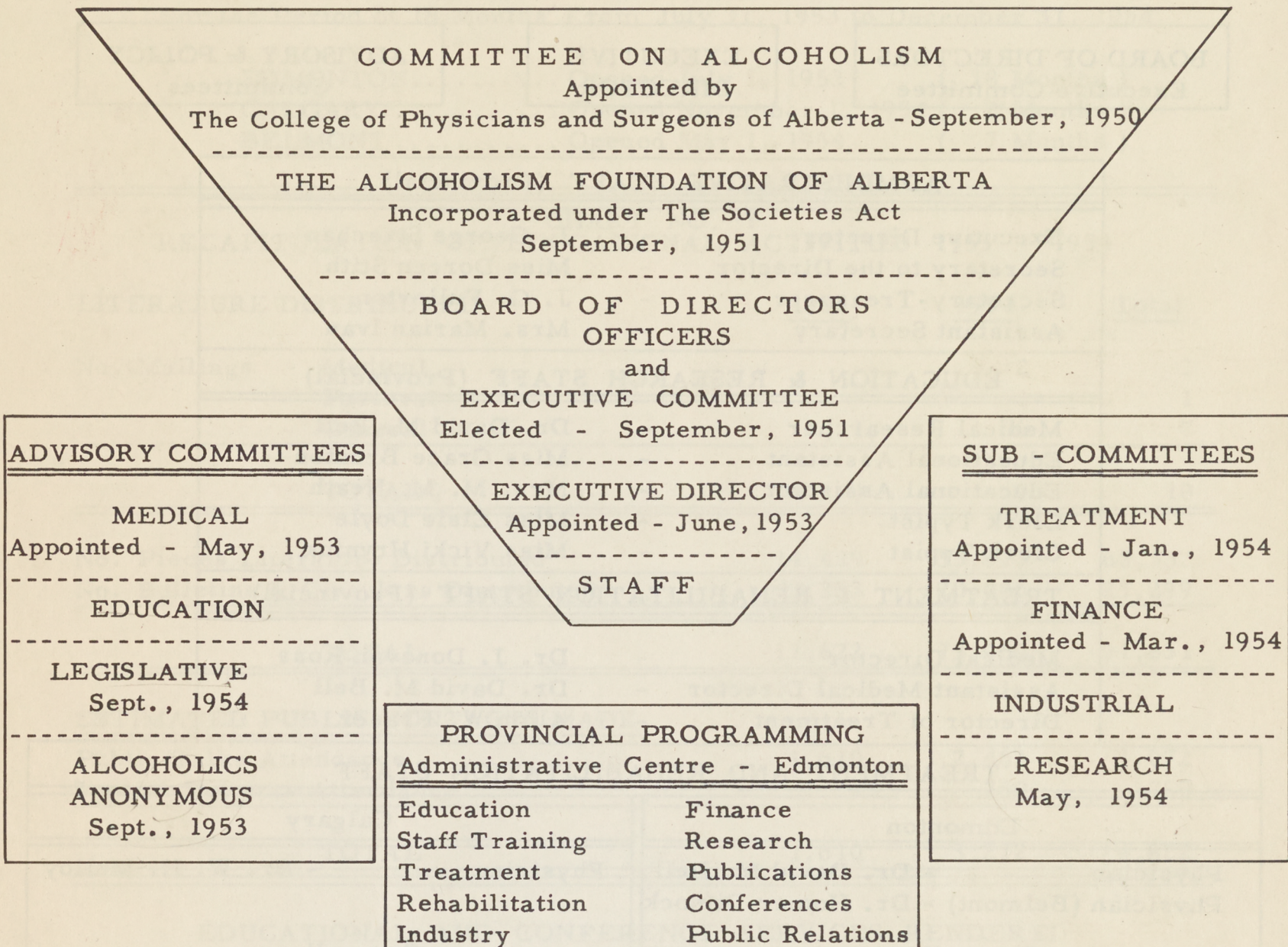
As outlined on the chart, the function of the Edmonton Administrative Centre is the administration of the following provincial programs:

Education	Staff Training	Treatment
Rehabilitation	Industry	Finance
Research	Publications	Conferences
	Public Relations	

The established Centres in Calgary and Edmonton provide the following services:

Information	Referrals to Hospitals
Out-Patient Treatment	Rehabilitation
Public Programming - Speakers' Bureau	
Literature and Library Facilities	
Referrals to other facilities - A.A., Family Court, etc.	

THE ALCOHOLISM FOUNDATION OF ALBERTA
CHART NO. 1
ORGANIZATION & FUNCTIONS



* ESTABLISHED CENTRES

EDMONTON....July, 1953 CALGARY....October, 1954

SERVICES OF ESTABLISHED CENTRES

Information Services
Out - Patient Treatment
Hospitalization Referrals
Rehabilitation
Public Programming - Speakers' Bureau
Literature and Library
Referrals to Other Facilities....A.A., Etc.

* Information and Referral Centres and/or Clinics will be established as demands for services indicate their need and as staff and funds are available.

THE ALCOHOLISM FOUNDATION OF ALBERTA
CHART NO. 2
STAFF ORGANIZATION

BOARD OF DIRECTORS
Executive Committee

EXECUTIVE
DIRECTOR

ADVISORY & POLICY
Committees

ADMINISTRATIVE STAFF (Provincial)

Executive Director	-	J. George Strachan
Secretary to the Director	-	Miss Doreen Stith
Secretary-Treasurer	-	J. G. Fullerton
Assistant Secretary	-	Mrs. Marian Ivan

EDUCATION & RESEARCH STAFF (Provincial)

Medical Researcher	-	Dr. David M. Bell
Educational Assistant	-	Miss Grace Brunton
Educational Assistant	-	Mrs. M. M. Heath
Clerk Typist	-	Miss Elsie Doyle
Clerk Typist	-	Miss Vicki Hryniuk

TREATMENT & REHABILITATION STAFF (Provincial)

Medical Director	-	Dr. J. Donovan Ross
Assistant Medical Director	-	Dr. David M. Bell
Director of Treatment	-	Allon W. Fraser

TREATMENT AND REHABILITATION STAFF

Edmonton

Physician - Dr. David M. Bell
Physician (Belmont) - Dr. Homer Dimock

Counsellors

Allon W. Fraser (Sr. Counsellor)
E. A. Bergeron
Miss Hanna Christofferson
Miss Effie Cuthbertson
Pierre Gariepy
Miss Marian Hall (Nurse)
Miss Catherine McGuire (Trainee)
Gordon E. Stephenson (Trainee)

Receptionist - Mrs. Doreen Christy
Clerk-Typist - Mrs. Ethel Bellwood

Psychiatric Consultant -

Calgary

Physician - Dr. W. H. Mulloy

Counsellors

G. G. Myers (Sr. Counsellor)
Mrs. Anne Bouchier
A. W. Herrell
Miss Dorothy Mason (Nurse)
Mrs. Donna Tone

Receptionist - Miss Maud McKinley

Psychiatric Consultant -
Dr. F. W. Hanley

ADMINISTRATIVE STAFF

EDMONTON - Maintenance - A.G. Bohme

CALGARY - Maintenance -

PROVINCIAL AUDITOR - McCannel, Gee and Quinn

THE ALCOHOLISM FOUNDATION OF ALBERTA

Statistical Summary of Activities

For the Period of 18 Months From July 31, 1953 to December 31, 1954

EDMONTON..... Opened July 1, 1953 (18 Months)
 CALGARY..... Opened November 1, 1954 (2 Months)
 BELMONT Opened May 1, 1954 (7 Months)

CHART NO. 3 RECAPITULATION OF EDUCATIONAL ACTIVITIES 1953 - 1954

LITERATURE DISTRIBUTED	<u>1953</u>	<u>1954</u>	<u>Total</u>
No. Mailings - Medical	-	2	2
- Pastoral	-	1	1
- General	1	6	7
TOTAL	1	9	10

No. Pieces Literature Distributed	14,419	53,913	68,332
No. Bulletins & Circulars Distributed	3,253	20,046	23,299
TOTAL	17,672	73,959	91,631

<u>ESTIMATED PUBLIC CONTACTS MADE</u>			
Public Talks Attendance	1,610	2,462	4,072
Special Projects Attendance	-	750	750
TOTAL	1,610	3,212	4,822

EDUCATIONAL AND CONFERENCE SERVICES RENDERED (General enquiries, public program arrangements and planning)

	<u>1953</u>	<u>1954</u>	<u>Total</u>
Telephone Services	20	974	994
Interviews & Visitors	35	636	671
Mail Services	50	821	871
SUB-TOTAL	105	2,431	2,536

No. of Public Talks	56	59	115
No. of Radio Programs	19	44	63
No. of Special Projects	1	5	6
No. of Special Mailings	1	8	9
No. of Special Publications	2	7	9
SUB-TOTAL	79	123	202

GRAND TOTAL SERVICES RENDERED	184	2,554	2,738
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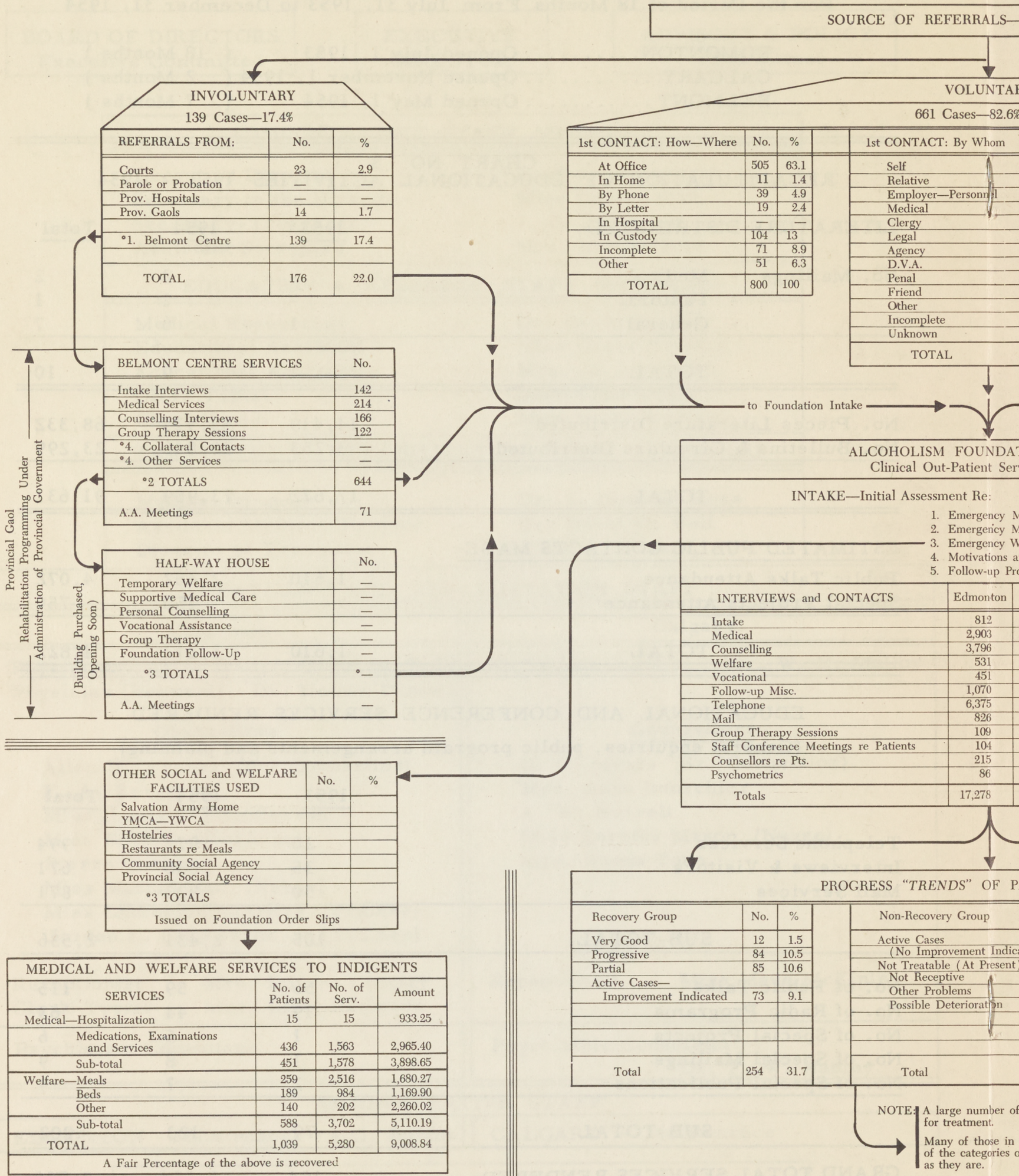


Chart No. 4

Including Statistical Summary of Related Services for 18 Month Period, Ending Dec.31, 1954

REFERRALS—800 PATIENTS—100%

VOLUNTARY

Cases—82.6% of Total

By Whom	No.	%	REFERRAL FROM:	No.	%
Personnel	504	63	Alcoholics Anonymous	312	39
	111	13.8	Publicity	97	12.1
	3	.4	Employer—Personnel	9	1.1
	27	3.4	Medical	73	9.1
	11	1.4	Clergy	20	2.5
	5	.6	Legal	23	2.9
	4	.5	Agency	23	2.9
	—	—	D.V.A.	3	.4
	22	2.7	Penal	164	20.5
	36	4.5	Friend	25	3.1
	2	.3	Other	24	3
	71	8.9	Unknown	11	1.4
	4	.5	Incomplete Files	71	8.9
	800	100	TOTAL	°4	°4

PATIENTS TREATED			
Centres	Male	Female	Total
Edmonton (18 months)	574	39	613
Calgary (2 months)	42	6	48
Sub-Total	616	45	661
*1. Belmont (7 months)	139	—	139
TOTAL	755	45	800

ENQUIRY CONTACTS RE POSSIBLE PATIENTS		No.
Centres		Total
Edmonton (18 months)		1,020
Calgary (2 months)		33
TOTAL		1,053

LEGEND

- *1. Releases from Belmont Centre
- *2. Belmont Services included in total services (after release)
- *3. Totals not available for this report, a part of forthcoming survey
- *4. No totals possible due to multiple referrals

to Foundation Intake

FOUNDATION CENTRES

Patient Services Rendered

ent Re:
Emergency Medical Care—Hospitalization
Emergency Medical Care—Clinical
Emergency Welfare Assistance
Motivations and Sincerity
Follow-up Programming

Edmonton	Calgary	Sub- Total	*2 Belmont	Total
812	60	872	142	1,014
2,903	23	2,926	214	3,140
3,796	241	4,037	166	4,203
531	12	543		543
451	3	454		454
1,070	12	1,082		1,082
6,375	143	6,518		6,518
826	12	838		838
109	6	115	122	237
104	46	150		150
215		215		215
86		86		86
17,278	558	17,836	644	18,480

PATIENTS HOSPITALIZED Through Foundation Centres		
TYPE OF HOSPITAL	No.	%
General Community	73	9.1
Provincial	37	4.6
Private Sanitariums	2	.3
TOTALS	112	14

GENERAL MEDICAL REFERRALS		
FROM PRIVATE PHYSICIANS	No.	%
Casual—No personal follow-up by patient's physician	51	6.4
Specific—Treatment correlated with Physician and Foundation	22	2.8
Total	73	9.2

GROUPS OF PATIENTS TREATED

Group	No.	%	Out of Contact Group	No.	%
ement Indicated)	21	2.6	In Custody	36	4.5
(At Present)			In Institutions	13	1.6
ve	96	12	Incomplete Cases—		
ems	51	6.4	No Assessment Possible	71	8.9
erioration	8	1	Moved	86	10.8
			Deceased	7	.9
			Transient Floaters	57	7.1
			Unknown	100	12.5
	176	22	Total	370	46.3

ge number of these two groups will return (some several times) to Intake and be readmitted treatment.

of those in the Unknown, Transient, and Incomplete Groups may properly belong in one categories of the "Recovery Group" but until this is definitely KNOWN, they must remain y are.

return to Intake

DISPOSITION OF PATIENTS		
Referrals to:	No.	%
Continued Foundation Care	665	83.1
Referrals to A.A.	446	55.7
Referrals to Other Agencies	74	9.3
Referrals to Prov. Hosp.	37	4.6
Belmont Rehabilitation Centre	—	—
Other	71	8.9
Incomplete—No Referral	394	49.3
TOTAL	°4	°4

PERSONAL HISTORY DATA ON * 729 PATIENTS (100%) TREATED DURING 18 MONTH PERIOD

CHART NO. 5

	EDMONTON & CALGARY		BELMONT		TOTAL	
	No.	%	No.	%	No.	%
<u>RESIDENCE STATUS</u>						
Res. of City	352	57.7	27	22.7	379	51.9
Res. of Alberta	143	23.4	42	35.3	185	25.4
Res. Out of Province	43	7.1	26	21.8	69	9.5
Transient and Unknown	72	11.8	24	20.2	96	13.2
Property Owner	190	31.1	20	16.8	210	28.8
Rents Home	156	25.6	21	17.6	177	24.3
Rooms	76	12.5	12	10.1	88	12.1
Other	51	8.3	9	7.6	60	8.2
None or Unknown	137	22.5	57	47.9	194	26.6
<u>AVERAGE AGE</u>						
Male	40.1	-	39.5	-	40.	-
Female	35.4	-	-	-	35.4	-
Total	39.7	-	39.5	-	39.7	-
<u>MARITAL STATUS</u>						
Married	273	44.8	21	17.6	294	40.4
Single	121	19.8	50	42.	171	23.5
Widowed	23	3.8	4	3.4	27	3.7
Separated	102	16.7	25	21.	127	17.4
Divorced	28	4.6	12	10.1	40	5.5
Divorced & Remarried	25	4.1	-	-	25	3.4
Other and Unknown	38	6.2	7	5.9	45	6.1
TOTAL AND AV. DEPENDENTS	1682	2.7	186	1.6	1868	2.6
<u>AV. YRS. DRINKING DURATION</u>						
	17.7	-	19.5	-	18.1	-
<u>AVERAGE YEARS A PROBLEM</u>						
	6.3	-	9.4	-	6.8	-

	EDMONTON & CALGARY		BELMONT		TOTAL	
	No.	%	No.	%	No.	%
<u>PREVIOUS CONTACTS</u>						
A.A.	360	59.	34	28.6	394	53.9
Doctors	245	40.2	16	13.4	261	35.4
Hospitals and Clinics	245	40.2	29	24.4	274	37.5
Agencies and Welfare	91	14.9	12	10.1	103	14.1
Penal	-	-	1	.8	1	.1
Other and Unknown	157	25.7	65	54.6	222	30.4
<u>VETERAN STATUS</u>						
Veteran	322	52.8	61	51.3	383	52.5
Non-Veteran	270	44.3	51	42.8	321	44.
Unknown	18	2.9	7	5.9	25	3.5
<u>EMPLOYMENT STATUS</u>						
Employed	281	46.1	15	12.6	296	40.6
Unemployed	291	47.7	98	82.4	389	53.3
Retired	38	6.2	6	5.	44	6.1
<u>VOCATIONAL CLASSIFICATION</u>						
Professional	48	7.9	-	-	48	6.6
Executive & Managerial	76	12.5	2	1.7	78	10.8
Sales	78	12.8	1	.8	79	10.8
Skilled	247	40.5	39	32.7	286	39.2
Agriculture	24	3.9	7	5.9	31	4.2
Labor - General	63	10.3	55	46.3	118	16.2
Other and Unknown	74	12.1	15	12.6	89	12.2
<u>ATTITUDE ON FIRST CONTACT</u>						
Good	306	50.1	73	61.4	379	51.9
Fair	82	13.5	3	2.5	85	11.7
Poor	64	10.5	18	15.1	82	11.2
Non Co-operative	158	25.9	25	21.	183	25.2
Uncertain						

* Based on total of 729 Cases only...as remaining 71 cases represent "Incomplete Case Histories" with data incomplete and not assessable. Percentages therefore are figured for this summary on basis of 729 Cases as being 100%. Additional data and information available in separate reports as appendices reports.

PROSPECTUS OF A PROGRAM FOR THE FOUNDATION

To be effective a program should co-ordinate the efforts of health and welfare agencies, law enforcement agencies, mental hospitals, members of the medical profession, industrial and labor personnel, educators, and members of the clergy. As an initial step in the development of its program, The Foundation enlisted the support of these groups and individuals.

The Foundation realized that a changed public attitude was essential to the success of its program. Consequently, an educational program aimed at reaching every level of the province was developed. By means of radio, public talks, and other educational media, The Foundation acquainted the public with the seriousness and extent of the problem and with the concept that alcoholism is a treatable illness.

The Foundation's prospectus is based on the fact that alcoholism is found at all economic and social levels, and at all levels of intelligence. It is not generally realized that Skid Road alcoholics -- those who are costly repeaters in courts and burdens on welfare agencies -- represent only 15% to 20% of the "problem drinking" population. The remaining 80% to 85%, some of whom are "hidden problems" (those whose drinking problem is "covered" by family or fellow-workers) deserve a proportionate share of attention. The Foundation recognizes its responsibility to provide treatment and rehabilitative services to both groups.

If alcoholics are to be helped to recovery, there must be a total program for their rehabilitation. Most alcoholics will need medical care and counselling; some will need food, clothing, shelter, and employment assistance; all will need social acceptance.

A program prospectus incorporating the foregoing basic ideas was outlined and presented to the Board at its first meeting, September 3rd, 1953. The achievements, as reviewed in this report, confirm the soundness of the original prospectus.

As the program develops and as the services of The Foundation expand, the prospectus will be modified to meet the needs of the province.

The major goal of this public health program is the prevention of alcoholism through the development of the following programs:

1. Education
2. Treatment
3. Rehabilitation
4. Research

As an essential part of this First Annual Progress Report the goals and achievements of each program are reviewed.

EDUCATIONAL PROGRAM

The educational program of The Foundation is geared to the needs of young people, of the community, and of special professional groups. The long term objective of the program is prevention of alcoholism. The immediate objectives are:

To acquaint the public with the symptoms of alcoholism so that problem drinkers will seek treatment at an early stage;

To enable families and friends to assist the alcoholic;

To assist professional people to recognize alcoholism and to direct alcoholics whom they encounter to sources of treatment;

To co-operate with all organizations concerned with the education of young people.

1. Youth Programs

A. Alcohol Education in Alberta Schools:

In 1953 the Alberta Department of Education set up a Subcommittee on Alcohol Education to prepare courses for grades nine and ten. Working in conjunction with representatives of the Department of Education, staff members of The Foundation participated in the revision of materials for these courses.

Instruction about alcohol was introduced into 200 selected classrooms throughout the province in the spring term, 1954. Based on comments and suggestions received from teachers, further revision of the material was carried out by the Subcommittee and Foundation staff members during the summer of 1954. The revised course was then introduced into all grade nine and ten classrooms in Alberta.

B. Special Youth Programs:

The Foundation co-operates with all organizations requesting factual instruction about alcohol for groups of young people. Films, speakers, and selected literature are provided.

During Easter Week, 1954, about 65 students from Alberta College attended The Foundation for a total of six hours' instruction about alcohol and alcoholism.

Talks have been given to many young people's church groups and service clubs.

2. Community Programs

A. Publications and Literature:

Pamphlets covering various aspects of the problems of alcoholism have been prepared, published, and widely distributed by The Foundation. A complete stock of special publications from A.A. Headquarters, the Yale Center of Alcohol Studies, the National Committee on Alcoholism, and other organizations have been distributed.

B. Public Talks:

The speakers' bureau has furnished staff speakers to numerous church and civic groups, A.A. groups, and service clubs throughout the province.

C. Radio Programs:

Through the co-operation of the radio stations of Alberta, The Foundation has been able to reach a wide audience.

During the 1953-54 radio "season", a series of talks by the Director of The Foundation was carried by CKUA Edmonton, every Wednesday evening. Other broadcasts, including talks by the Director, were made from Lethbridge, Medicine Hat, Red Deer, Calgary, Edmonton, Grande Prairie, and over a nation-wide CBC network. Five French-language broadcasts were made from CHFA Edmonton.

The following series were scheduled for the 1954-55 broadcasting "season":

- (1) "The Alcoholic in an Out-Patient Clinic" - over CJDC Dawson Creek, CFGP Grande Prairie, CFCW Camrose, CKUA Edmonton, CFAC Calgary, and CKRD Red Deer.
- (2) "The Lonesome Road" over CKUA Edmonton.

D. Press and Periodicals:

The press has been most co-operative in reporting The Foundation's services and activities. Announcements, news stories, and feature articles have appeared in all Alberta dailies and in many weeklies as well as in the Toronto Star Weekly.

E. Films and Recordings:

Many groups have taken advantage of The Foundation's film and record lending library.

3. Orientation Programs For Professional Groups

A. The Alberta Conference on Alcohol Studies:

In co-operation with the Department of Extension, The Foundation sponsored the First Annual Alberta Conference on Alcohol Studies at the University of Alberta in Edmonton, August 30th through September 2nd, 1954. Lecturers and staff were drawn from the Yale Center of Alcohol Studies and from other centers dealing with alcoholism education, research, treatment, rehabilitation, and public information. The object of the Conference was to bring to those confronted by the problems of alcoholism and abnormal drinking a wider understanding of those problems and methods of dealing with them.

The response was most gratifying. Delegates represented professional groups whose intelligent understanding of the alcoholic and alcoholism can do most to assist in the treatment and prevention of the illness.

The 1955 Conference, which is to be held in Edmonton, August 21st through August 27th, is now being organized.

B. Bursaries:

Bursaries are available to assist selected applicants to attend the Alberta Conference on Alcohol Studies and the Yale Summer School on Alcohol Studies.

C. Special Programs:

Special talks, study groups, and displays have been arranged for various professional groups whose members encounter the problems of alcoholism. Programs have been developed for nurses, welfare workers, clergymen, medical students, psychology students, business and industrial associations, and Alcoholics Anonymous groups.

D. Special Publications and Mailings:

The Foundation has assumed responsibility for the preparation and distribution of the latest technical information to selected groups throughout the province.

The Medical Advisory Committee, through the Subcommittee on Treatment, developed a program of medical treatment for the alcoholic. This, together with the other publications of interest to the medical profession, has been mailed to all doctors and hospitals in the province.

Pamphlets dealing with the pastoral counselling of alcoholics were mailed to clergymen throughout the province.

TREATMENT AND REHABILITATION

Basic Concepts

Initial treatment often involves assisting the patient and his family to recognize problem drinking or alcoholism as an illness that can be successfully treated and to which no shame or stigma is attached.

It should be emphasized that less than 10% of patients seeking treatment require hospitalization and that the majority of these require only a brief period of medical care. Only a very few require institutional care for emotional complications. Because of improved treatment techniques and a greater understanding on the part of doctors and hospital personnel, seriously disturbed patients, patients with delirium tremens or other complications, need not be feared. Newer treatments are increasingly specific and effective. For all patients the prognosis is greatly improved. Present treatment routines make it possible to treat the alcoholic patient in the general hospital without the special precautionary measures once required. This eliminates the "tapering off" process, and reduces the necessity for special nurses and special rooms. Sedatives and narcotics can be dangerous and are usually not needed.

Claims of success in the therapy of alcoholism have been made for different treatment techniques: the use of antabuse, hormones, and vitamins; the aversion and conditioned reflex techniques; and the therapy of Alcoholics Anonymous. The good results that have been reported by the advocates of each method are directly related to the understanding, skill, and enthusiasm of the therapist.

Initial medical treatment, whether hospital or out-patient, is only the beginning of recovery. Abstinence and discharge from a clinic do not constitute complete rehabilitation. In the truest sense, rehabilitation means restoring the individual to the fullest physical, mental, social, and economic usefulness of which he is capable.

Alcoholism is never "cured" in the conventional sense of the term. Like tuberculosis and diabetes it can be arrested, but it remains arrested, only while the patient avoids alcohol.

Success in treatment toward rehabilitation depends greatly upon the attitude of the patient as well as on the attitude of his family and friends. He must want to get well and have the ability to do something about it. Often-times it is the job of the counselling team to instill this "want to get well" attitude. The family, too, may need education and treatment. They need to learn to eliminate the fear and ignorance still prevalent regarding alcoholism. The "well ones" may need to make the first decision for the alcoholic, but this should be a guided decision. Thousands of recovered problem drinkers are striking evidence that the alcoholic can be completely rehabilitated.

There is no single road to the rehabilitation of the alcoholic. Minimal requirements consist of physical health, rest, and food; a relaxation of guilt feelings; a developing sense of self-discipline; a realistic perception of the world around him and the part he has to play in it; and a re-introduction into social groups.

The Foundation is convinced that the most effective treatment and rehabilitation of the alcoholic results from clinical teamwork, that is from the combined efforts of the internist, nurse, consultant psychiatrist, psychologist, social worker, vocational adviser, in conjunction with other available resources. The alcoholic usually requires the understanding and support of his family, his employer, and his spiritual adviser. The emphasis in treatment is determined by the needs of the "whole individual".

TREATMENT

Approach And Procedure

Requests for advice and assistance in dealing with alcoholics are received by telephone, mail, and personal contacts. These enquiries come from alcoholics, relatives, friends, doctors, ministers, and agencies. Wherever possible The Foundation attempts to follow through on all enquiries and to establish a workable contact with the alcoholic or some members of his immediate family.

It may be necessary to work with these collateral contacts so that they may be able to help the patient to recognize his need for treatment and to accept treatment. Though oftentimes a slow process, this procedure is usually successful.

The Foundation's clinical staff includes non-alcoholics as well as recovering alcoholics. Individually and collectively, members of the treatment staff make every effort to create a warm, co-operative and understanding atmosphere conducive to establishing rapport with the patient and his family.

Those seeking treatment or advice are not kept waiting. Regardless of the demands of The Foundation's other programs, the needs of the patient always receive first consideration.

The furnishing and appointments of The Foundation have been chosen with a view to providing an environment which is cheerful and reassuring.

On the patient's initial visit to the clinic he is referred, with as little delay as possible, to an intake worker. During the intake interview, an over-all picture of the case is secured and the patient is given a general idea of The Foundation's basic concepts with regard to the illness and its treatment. An appointment is made for him to see the staff physician and a counsellor.

The case is reviewed in a staff conference, a tentative treatment program outlined, and the patient is assigned to a specific counsellor for follow-up therapy.

Emergency needs of the patient - medical, welfare, or employment - receive immediate attention.

Treatment Techniques

The treatment program is flexible enough to meet the needs of each patient. There are several types of treatment which may be used singly, but which are generally used in combination:

Individual Therapy

Most patients benefit from individual interviews with trained counsellors. In the main, therapy of the directive - supportive type is utilized. Depending upon the particular circumstances of the case, insight therapy may be used: in the initial period of treatment, after participation in group therapy, or after a period in A.A.

Depending upon the individual's needs, The Foundation maintains contact with patients for varying lengths of time.

Group Therapy

Recovering patients participate in a series of group sessions on alcoholism at The Foundation. Films, charts, talks, and discussions are utilized. Most patients are encouraged to attend and to bring their wives or husbands. At the last meeting of each series an A.A. member leads a discussion on Alcoholics Anonymous.

Fees

As an integral part of therapy, The Foundation encourages the patient to contribute financially toward his recovery.

A fee of \$ 10.00 is levied which covers a complete physical examination, psychological testing, and counselling.

The only additional fees charged are for the nominal expenses incurred for continuing medical services and medication. No fees are charged for continuing counselling services. Charges made are accrued to the patient's account and may be budgeted.

No patient is ever denied treatment by The Foundation because of inability to pay.

Alcoholics Anonymous

The fellowship of Alcoholics Anonymous and The Foundation are entirely separate and distinct activities. By tradition Alcoholics Anonymous may not lend its name to any related activity or outside enterprise. Their approach to the alcoholic should remain forever non-professional. The Foundation adheres to and respects the traditions and anonymity of A.A.

Over forty percent of the referrals received at The Foundation come from members of Alcoholics Anonymous. Members of A.A. refer problem drinkers to The Foundation for medical care, welfare aid, and special counselling.

A.A. counselling is not done at The Foundation. Patients are referred to local A.A. groups or to A.A. members who have similar background of achievement and interests so that rapport may be easily established.

There are many problem drinkers who "have tried A.A." or who feel that they "don't need A.A. yet", who are sometimes more easily approached and aided through a clinical contact. These same individuals, after having achieved an understanding of their problem, then relate themselves more readily and effectively to the program of Alcoholics Anonymous.

Recognizing the unique role played by the fellowship of Alcoholics Anonymous in achieving and maintaining the recovery of problem drinkers, The Foundation makes every effort to bring the recovering patient into early contact with A.A.

Rehabilitation Of The Incarcerated Alcoholic

The Foundation recognizes the need for special types of rehabilitation for the incarcerated alcoholic. The Foundation rehabilitates patients who are referred by provincial jails, courts, and missions. They are assisted to sobriety, and, when necessary, are granted welfare and employment aid. The Foundation's counsellors have had some success with these patients, many of whom are now satisfactorily employed.

However, as our initial prospectus emphasized, a special program is necessary for the successful rehabilitation of the incarcerated alcoholic.

To provide such a program, the Provincial Government through the Attorney General's Department, began the development of the Belmont Rehabilitation Centre, a jail farm and rehabilitation centre for alcoholics. The administration and security at Belmont are under the jurisdiction of the Attorney General's Department.

Staff members from The Foundation assist in the therapy undertaken at Belmont and in post-release rehabilitation.

There are no direct admissions to Belmont: inmates of provincial jails whose convictions indicate a drinking problem may be transferred to Belmont -- usually for the last 30 or 40 days of their sentence.

The present temporary home shelters about 50 inmates; the permanent home, now under construction, will handle approximately 200 patients. Although the Belmont project is only partially developed, it has already evidenced considerable success. Greater achievements are anticipated when the entire program is developed.

Rehabilitation Of The "Homeless Man"

As a necessary step toward rehabilitation of the destitute alcoholic, The Foundation's prospectus recognizes the need for a Half-Way House, a temporary home where clothing, food, and lodging could be provided at a nominal charge during the period when necessary environmental changes are being made for the patient, and while employment and a program of rehabilitation are being planned.

The indigent alcoholic needs supervision during this period of re-adjustment while he is trying to break with old associations which involve the drinking cycle. When the individual is settled in a job and is able and ready to move out again, he should be encouraged to do so. Association with A.A. group activities, providing continuing fellowship with other sober and recovering alcoholics, is an important function of the program of a Half-Way House.

Since the development of the Belmont Rehabilitation Centre, the need for a Half-Way House has become more apparent. Belmont releasees will be taken care of by a Half-Way House which is being opened by the Provincial Government.

The Foundation's plan to open a Half-Way House has been temporarily deferred. Until this project can be developed, The Foundation will continue to provide food and lodging for homeless men through the Salvation Army, Y.M.C.A., and private boarding houses. The Foundation has also enjoyed the co-operation of city and provincial welfare organizations in both Edmonton and Calgary.

ALCOHOLISM RESEARCH

A great deal more research is essential if we are to achieve an understanding of alcoholism. Much has been learned but there are many areas still to be investigated.

In considering a research program for The Foundation, it was deemed advisable during the organizational period to attempt only such research as would assist in the assessment of the over-all program being evolved. Now that some of the activities of The Foundation are organized, it is necessary that a program of research be developed in relation to the needs and activities of the province. It is hoped that a medical research program may soon be established in conjunction with the University, its medical faculty, and with the hospitals of the province. Edmonton and Calgary hospitals have expressed their willingness to co-operate.

It was early recognized that the alcoholism treatment techniques in general use were inadequate and outdated. Therefore, a Subcommittee on Treatment assumed the responsibility of reviewing the latest medical techniques and preparing a recommended treatment program for distribution throughout the province. This treatment program is continually under review by that Subcommittee. As funds, facilities, and personnel are available, other medical research projects will be developed.

In order to deal effectively with alcoholism it is necessary to consider other problems arising from the use and abuse of alcohol in our society. As our major project this year, we hope to complete studies into the incidence and costs of alcoholism in Alberta, the incidence of arrests, and the welfare and institutional costs related to excessive drinking.

PREVENTION

In the field of public health, the goal of educational, treatment, and research programs is the prevention of disease. As yet, alcoholism is not identifiable either as an organic or an emotional disorder. Simple exposure to alcohol itself is not the single cause of abnormal drinking.

None of the many experiments in the prohibition of alcohol has resulted in the prevention of alcoholism. Only early recognition and treatment of problem drinking will prevent chronic alcoholism with all its complications.

Prevention is the ultimate goal of all The Foundation's programs. The training of professional groups toward a recognition of known danger signs, and the presenting of factual information to young people are among the means used by The Foundation to attain its goal. In addition, The Foundation strives for a changing and enlightened community attitude toward the problems of alcohol and alcoholism.

The Foundation is directing special attention toward the problem drinker in business and industry. Experience has shown that here, more than in any other circumstance, alcoholism can be recognized in its incipient, pre-addictive phase and can be arrested. Programs to this end are being encouraged in various industries throughout the province.

Evidence of the success of The Foundation's educational program is apparent. A number of individuals whose drinking in the general sense is not abnormal, but is within the accepted norms of their own social group are now approaching the Foundation for information on and insight into their drinking patterns. Many young people are now seeking advice and counseling. Thus, there is every reason to hope that the goal of prevention can become a reality.

EXECUTIVE DIRECTOR'S REPORT

It was an honor to return to Canada as Executive Director of The Alcoholism Foundation of Alberta. Before the development of the Alberta Program became my responsibility, careful groundwork had been done by those dedicated and far-sighted workers whose efforts are summarized in the brief historical outline recorded in this report. The wholehearted interest and co-operation that I have found on the part of professional groups and agencies throughout the province have greatly facilitated the growth of our program.

The program which I was called upon to implement was an ambitious one. A prospectus had to be drawn up to meet the needs of the Province of Alberta. It was necessary to acquaint Alberta communities with the problems of alcoholism and with the objectives and facilities of The Foundation. In order that our program might achieve maximum efficiency, our efforts had to be co-ordinated with those of other alcoholism programs. Staff had to be recruited and trained.

The splendid co-operation which I have received from groups and members of Alcoholics Anonymous throughout the province has made my task a pleasant one. The phenomenal success of this extraordinary movement has had a marked influence on the development of alcoholism programs, and much of the success of the Alberta Program must be attributed to the support and interest of Alcoholics Anonymous.

I wanted to meet the people of Alberta, and during my first six months as Director of The Foundation I travelled thousands of miles speaking to church groups, service clubs, professional societies, and A.A. groups. During September, 1953, I visited the Peace River country -- Grande Prairie, Bluesky, and Dawson Creek. In October I travelled through Central Alberta -- Wetaskiwin, Ponoka, and Red Deer. By November I was able to visit Calgary, Lethbridge, Medicine Hat, and Hanna. In the spring I visited the northeastern part of Alberta -- Wainwright, Lloydminster, and Elk Point. The co-operative, open-minded attitude with which I was received has been an inspiration to me and an asset to the development of the program.

One of my many "first" tasks was to recruit workers, orient them to their responsibilities, and arrange for their specialized training. As the needs of The Foundation became known, people interested in the problems of alcoholism joined our staff. I am indeed grateful for their loyalty, hard work, and intelligence. As pressure of work permits, members of our staff are sent to the Summer School of Alcohol Studies at Yale University. The four staff members and the board member who attended the school in 1954 found that the lectures and seminars increased their knowledge and understanding of the problems of alcohol. The courses offered by the Yale Center are an essential part of staff training.

As part of the First Annual Alberta Conference on Alcohol Studies, a meeting of directors of provincial programs on alcoholism was held in the offices of The Foundation. The following were in attendance: H.D. Archibald, Executive Director, Alcoholism Research Foundation of Ontario; J. F. A. Calder, Director, Bureau on Alcoholism, Saskatchewan; M. Ross Mounce, Executive Director, Committee on Alcoholism for Manitoba; George Riddell, representing E. D. McRae, Executive Director, Alcoholism Foundation of British Columbia; Dr. J. D. Ross, President, Alcoholism Foundation of Alberta; J. George Strachan, Executive Director, Alcoholism Foundation of Alberta. Problems of mutual concern were discussed with a view to developing a Canadian Committee on Alcoholism.

Our program has received splendid support from many sources. The Government of Alberta has exhibited an open-minded, humane, and far-sighted interest in the whole problem of alcoholism. The Attorney-General's Department is to be commended for developing the Belmont Rehabilitation Centre for the rehabilitation of incarcerated problem drinkers.

I wish to extend a special word of thanks to Dr. J.D. Ross who, by his untiring enthusiasm, dedicated interest, constant support, and friendship has done more to assist me than words can express.

I am proud to say that leaders in the field of alcoholism have been unstinting in their praise of the Alberta Program. Experts from Yale and other clinics have been a continuing source of encouragement and assistance.

This first year and a half of operation has been most gratifying. Much of our original planning is now being realized. Our program is reaching into all areas of the province and those who need help are finding it. Alberta is being recognized for its leadership in the field of alcoholism. At the same time we realize that much remains to be done, but we do have the means of doing it. Through education, treatment, rehabilitation, and research, we shall begin to achieve our ultimate aim -- the prevention of alcoholism.

J. George Strachan,
Executive Director,
The Alcoholism Foundation of Alberta.

THE ALCOHOLISM FOUNDATION OF ALBERTA
CHART NO. 6
BOARD AND COMMITTEES

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 Don McT.

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INDUSTRIAL COMMITTEE

THE ALCOHOLISM FOUNDATION OF ALBERTA

Educational and Information Services

The following services are available through the Edmonton Centre:

FILMS on alcohol and alcoholism are available to interested groups.

RADIO PROGRAMS dealing with problems of alcohol and alcoholism are being broadcast by many stations throughout the province.

RECORDED TALKS with special reference to the work of Alcoholics Anonymous are available to interested groups.

THE ANNUAL ALBERTA CONFERENCE ON ALCOHOL STUDIES is designed to create a greater understanding of the problems of alcoholism and methods of dealing with those problems. The Conference is of one week's duration. Lecturers are internationally recognized authorities in this field.

BURSARIES are available to assist selected applicants to attend the Alberta Conference on Alcohol Studies and the Yale Summer School of Alcohol Studies.

The following services are available at all Foundation Centres:

PAMPHLETS providing information on alcoholism and problem drinking are available to any individual, and to any church, civic, school, business or professional group.

A REFERENCE LIBRARY provides technical literature for special studies and research.

A SPEAKERS' BUREAU furnishes speakers to professional, church, and civic groups. Arrangements may be made to hold meetings at The Foundation.

For further information regarding any of these services

VISIT OR WRITE

THE ALCOHOLISM FOUNDATION OF ALBERTA

9910 - 103rd Street
Edmonton, Alberta

or

737 - 13th Avenue West
Calgary, Alberta

THE ALCOHOLISM FOUNDATION OF ALBERTA

Statement of Receipts and Disbursements and Cash Fund Balance for
18 Month Period Ending December 31, 1954.

Cash on Hand				\$	75.42
<u>Receipts</u>					
Government Grants 1953	\$ 70,000.00				
Less Amount Applied on Purchase of Property	<u>26,728.25</u>	\$ 43,271.75			
Government Grants 1954		<u>100,000.00</u>	143,271.75		
Memberships & Contributions 1954		\$ 8,354.50			
Memberships & Contributions 1953		<u>7,021.00</u>	15,375.50		
Conference Proceedings			30.00		
Bursary Scholarships			<u>995.00</u>		
					\$ 159,747.67
<u>Disbursements</u>					
Organization Expense		\$ 4,698.35			
<u>Educational Programming</u>					
* Administration	\$ 11,258.62				
Literature & Library	6,916.07				
Conference on Alcohol Studies	5,655.31				
Staff Training (School & Conference)	4,273.93				
Radio Programs	<u>447.54</u>	28,551.47			
<u>Treatment Programming</u>					
* Administration	\$ 20,895.25				
** Patient's Medical & Emergency					
Hospital Expense	\$ 3,597.40				
Less Recovered	<u>297.15</u>				
Balance: Partially Recoverable		<u>3,300.25</u>	24,195.50		
<u>Rehabilitation Programming</u>					
* Administration	\$ 17,012.45				
Welfare Advanced	\$ 5,110.19				
Less Recovered	<u>1,263.86</u>				
Balance: Partially Recoverable		<u>3,846.33</u>	20,858.78		
<u>Research Programming</u>					
* Administration			4,355.16		
<u>General Administration</u>					
Salaries, Travelling, Utilities, Stationery,					
Printing, Postage & Maintenance		<u>38,546.42</u>			
<u>Total Operating Expense</u>					\$ 121,205.68
Balance Applied as Follows					\$ 38,541.99
<u>Fixed Assets</u>					
Furniture & Fixtures		\$ 21,864.48			
<u>Current Assets</u>					
Secured Deposits	\$ 470.00				
Accounts Receivable	7,724.56				
Prepaid Insurance	<u>207.65</u>	<u>8,402.21</u>	<u>30,266.69</u>		
Petty Cash Fund	\$ 207.77				
Balance in Bank	<u>8,067.53</u>				\$ 8,275.30

Audited & Found Correct December 31st, 1954 *McCannel, Gee & Quinn* McCannel, Gee & Quinn
Chartered Accountants

- * Administration includes: Salaries, Travelling, Utilities, Stationery, Printing, Postage & Maintenance
 ** Patient's Medical Expense Does not Include Examination & Service Fees which are a part of Accounts Recoverable.

SERIAL M1 40815808 HSS



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MAR 6 '63

AUG 17 RETURN

RUTH MR 30 '76

MAR 3 1 RETURN

Due Ruth	R 05'87
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MAR 28 RETURN



1st

1953-54

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